

EMSPC Meeting
Tuesday, September 27, 2011
9:00 Columbus Center, Room 106

Meeting called to order by Dr. Julie Fox at 9:05

CARES

CARES: Cardiac Arrest Registry to Enhance Survival. CARES is a CDC project based out Emory, Atlanta and is a pre-hospital registry of cardiac arrests that looks at survival/not survival by collecting a small amount of data points (approx 20), five of which are required from hospitals. This program has been set up over the last 6-8 years across the United States, and we are now adopting this statewide. It is anticipated that this will be seamless to pre-hospital providers, as the information will be pulled from POLARIS data (all data points will be made mandatory in the POLARIS system). BEMS is going to hire a CARES coordinator who will provide information back to both hospital and EMS points of contact. The information collected will be protected by state QA and HIPAA regulations. The program is anticipated to begin this fall or the first of next year. Feedback will begin shortly after data has started being collected.

Protocols

B/C Fowlks thanked the group for the work they have put into updating the protocols.

Out of Valley Transports: stable - can go out of valley, unstable - closest facility whether it is in the valley or not.

Behavioral Problems: remove the term "competent" from various places in the protocol and change to: "potentially harmful to themselves or others". Line 2 under dispositions add "If minor, refer to parent or legal guardian".

APPROVED, will be sent to Mike Bohling to put up on the 2B website this afternoon. The protocols can be listed in alphabetical order if everybody would like.

Divert Review

Everything on the divert report looked okay, proper divert terminology was used and there were no issues to report.

Mike Veenendaal wanted to remind everybody that the correct number to call VECC is (801) 840-4061.

BEMS

The biggest item the bureau is looking at right now is the transition to new EMS levels. They have changed some rules to read new language to reflect the new EMS levels. Raul will pass information to Meisha to email to the EMSPC group. Some of the language has been changed for: general definitions, service levels, licensure types and vehicle supply requirements.

BEMS is working with all counties on inconsistent licenses, overlapping issues, annexations, going out to counties grouped according to region. The Salt Lake valley dates will be sometime around February of next year. State is looking at boundaries, please also use this as a forum if any discussion needs to take place between EMS agencies.

DMAT: Disaster Medical Assistance Team something BEMS helping support, federal asset to National Disaster Medical System. The team currently has around 35 members, 27 going through app process, and about 150 who are in some point of the application process. State wants to promote to anyone interested, follows the structure of ICS with logistical and finance components. The Utah team is in a developmental phase, right now we would backfill for Arizona if they get called out. The team would deploy for two weeks, paid by the federal government. The only disqualification is if you are already on federal team or if you are not a US citizen.

Tourniquet curriculum has gone out, been sent to the group but will send out again. The state will provide a MCI pack that will include two cat tourniquets per vehicle. Raul will follow up with April Larsen and let the group know when they will be coming out. After the rule goes into effect, agencies will be given 6 months to update their stocks. This will be effective the first of next year to next spring, so shoot for January to start acquiring supplies.

The two Paramedic rule to one Paramedic, and one Advanced EMT is being reviewed. Any paramedic waiver is mostly to support rural EMS agencies, this is still being reviewed and is still under debate. The operations sub committee is reviewing this and will report back for debate between EMS committee. It was initially a proposed rule, but has gone back for more discussion.

A motion was made to create a legislative subcommittee to represent the interests of the EMSPC up at the state EMS committee meeting. They would attend meetings, bring back information, facilitate a discussion, and take results of that discussion back to BEMS representing the EMSPC. The state EMS committee meets quarterly, with the agenda posted on the Bureau's website. The subcommittee would meet the month before the state EMS committee meeting. This motion was APPROVED, contingent upon it not interfering with our 501 c 3 business status, there are limitations to what we can do politically. Tom Burckhardt volunteered to chair this subcommittee and will recruit people to be on the committee. Some items that should be brought up in discussion are: certification of death, paramedic rule, and special events staffing language. Bring information back to next meeting.

CCR: Cardio Cerebral Resuscitation, studies look promising. WVC Fire and SLC Fire are teaching this to their crews to replace CPR. Dr. Taillac will present this during the next Physician Directors meeting. The training protocol will be emailed out to all agencies then the group can decide whether to take it to the EMSPC protocols.

Financial Update

We currently have 959.66 in the bank. Dr. Fox is still sorting out what we need to do for the online 501c3, we do have the 27 months before we need to file, and we are just about half way into that. If an agency needs documentation for their finance department, please email Dr. Fox the form (Julie.fox@mac.com) or other paperwork that needs to be filled out and she will email the completed forms back. An update of who has contributed will be provided during the next meeting.

New Business

SMH is still waiting for the joint commission to come and do their stroke review. SMH has also just submitted the application to become a Level III Trauma Center. Both SMH and LPH will be included in the process. It will be sometime in mid-October or early November before they start calling trauma alerts. They will have 9 months of collecting data before they request the state to review. When that happens this group will have to review the trauma destination protocol. Will bring this up in the next meeting.

Pre-hospital EKG's by fax instead of email? Only do if that's what the hospital requested.

Mass Casualty Exercise - 10 EMS agencies in the county were given money from MMRS to have a south end MCI drill. Turned out to be a drill for the entire county including Salt Lake, divided into four areas: Granite High School, Salt Lake Equestrian Park, Sandy Amphitheater, Multi-Cultural Center. Each area will have three drills involving 60-65 pre-hospital personnel. There will be a morning and an afternoon drill, consist of multiple scenarios with a combination of live patients and MCI manikins. Training has been sent out to agencies. The goal is for 70% of agencies will receive the same training so everything will be exactly the same. The hospital involvement will be JVH, PVH, AVH, SMH will receive patients in at least one drill. Please let Wayne Edginton know if your hospital would like to participate. They are expecting an ICS system to set up, to activate the hospital common channel, they will have wording that will state that it is a drill. All EMS agencies are represented and will have a good idea of what is going on with the drill. Please give accurate numbers of what you can take that day, not made up numbers (hospitals). Dates will be from mid October to the 28th. Information will be sent out to the entire group. Meeting to discuss the drill today at 11:00 if anybody is interested in attending.

Trauma Systems Advisory Committee: commissioned a mortality study where they looked at every traumatic death in the state for one year. The committee analyzed the primary causes of death and looked for opportunities to improve their care. The three main areas they observed deficiencies were: IV fluid resuscitation, blood resuscitation, airway management and documentation. The Trauma Systems Advisory Committee commissioned a subcommittee at the state to put together a training module to put out best current evidence based practices for IV fluid resuscitation for trauma patients for EMS and hospitals. Dr. Taillac would like to present the 45 minute lecture to the group. Would be happy to do more formally if you would like to invite many others and have at a separate time. Would like to get this out to as many as we can. This is a PPWT and training module will be posted on the BEMS website for everyone to pass on to their agencies. Plan on giving the abbreviated version during the next meeting and the EMSPC members can take to their agencies.

An official state protocol committee will be convening next month. Hope to have ready by summer 2012.

The next meeting will be at new location: Station 22 in Midvale 607 East 7200 South. We will update the outlook appointment a brand new request to reflect the new address so please take the old invitation off your calendars.

Meeting Adjourned: 10:34

Next Meeting: Tuesday, November 15, 2011